Butterflies Montessori Nursery

**Allergies Policy including Nut & Food Allergy**

**Statement of Intent:**

Butterflies Montessori Nursery are aware that children who attend may suffer from food, bee/ wasp sting, animal or nut allergies and we believe that all allergies should be taken seriously and dealt with in a professional and appropriate way.

We do not guarantee a completely allergen free environment, rather: to minimise the risk of exposure, encourage self-responsibility, and plan for effective response to possible emergencies.

Butterflies Montessori Nursery is committed to children **not** sharing food and drink.

The *Statutory Framework* states that the provider must obtain information about any dietary requirements/allergy. As such parents are asked to provide details of allergies in the child’s Application Form, which is submitted before starting nursery.

**AIM:**

The intent of this policy is to minimize the risk of any child suffering any allergic reactions whilst at nursery. An allergic reaction to nuts is the most common high risk allergy, and as such demands more rigorous controls throughout the policy.

**Role of other parents**

* Snacks and lunches brought to nursery by Parents should be **peanut and nut free**.
* The nursery will ensure that parents are regularly reminded and will monitor the contents of lunchboxes and snacks.

**The underlying principles of this policy include:**

* The establishment of effective risk management practices to minimise the child, staff, parent and visitor exposure to known trigger foods and insects.
* Staff training and education to ensure effective emergency response to anyallergic reaction situation.
* This policy applies to all members of the nursery community:
* Staff• Parents / Guardians• Volunteers• Supply staff• Students

**Definitions**

* **Allergy -** A condition in which the body has an exaggerated response to a substance(e.g. food and drug) also known as hypersensitivity.
* **Allergen -** A normally harmless substance that triggers an allergic reaction in theimmune system of a susceptible person.
* **Anaphylaxis -** Anaphylaxis, or anaphylactic shock, is a sudden, severe and potentially life-threatening allergic reaction to food, stings, bites, or medicines.
* **EpiPen -** Brand name for syringe style device containing the drugAdrenalin, which is ready for immediate inter-muscular administration.
* **Minimized Risk Environment**- An environment where risk management practices(e.g. Risk assessment forms) have minimised the risk of (allergen) exposure.
* **Risk Assessment/ Health Care Plan**- A detailed document outlining an individual child’s condition, treatment and action plan.

**Procedures and Responsibilities for Allergy Management**

**General**

* The involvement of parents and staff in establishing individual Risk Assessments/ Health Care Plans.
* The establishment and maintenance of practices for effectively communicatinga child’s healthcare plans to all relevant staff.
* Staff training in anaphylaxis management, including awareness of triggers and first aid procedures to be followed in the event of an emergency.
* Age appropriate education of the children with severe food allergies.

**Signs and symptoms** What we would class as mild or severe reactions are;

**Mild to moderate allergic reaction**

• Skin redness, hives or welts  
• Swelling of the face, lips and eyes  
• Tingling mouth, abdominal pain, vomiting.

**Severe allergic reaction/Anaphylaxis**

• Difficult/noisy breathing  
• Swelling of the tongue  
• Swelling or tightness of the throat  
• Difficulty talking and/or hoarse voice  
• Wheeze or persistent cough  
• Loss of consciousness and/or collapse  
• Children can quickly become pale and floppy.

If we suspect a child has had a reaction parents will be contacted immediately regardless of a mild or severe reaction.

**Medical Information**

* Parents will initially highlight a child’s allergies on Butterflies Montessori Nursery Application Form before starting at nursery.
* For children with a food allergy, parents will then be asked to fill out the Risk Assessment form. This will enable parents to explain the condition, define any allergy triggers and any required medication. If needed, additional written or oral advice will be obtained from a doctor or allergy nurse.
* Any change in a child’s medical condition during the year must be reported to the nursery.
* The nursery manager, Michele Dann, in her absence Deputy manager Amanda Lorrimer-Roberts will ensure that, where needed, a Health care Plan is established and updated for children with allergies.

**Medical Information (EpiPens)**

Where EpiPens (Adrenalin) are required in the Health Care Plan:

* Parents/guardians are responsible for the provision and timely replacement of the EpiPens. Two EpiPens will be required.
* EpiPens MUST be handed to staff- Parents to complete relevant Medicine Forms see below. Staff are to keep EpiPen on a high up window-sill in the kitchen. These are out of reach of children but quickly accessible for staff.
* EpiPen training will be provided for all staff when we have a child that requires an EpiPen.

**Parent's role**

**Parents are responsible for providing medical information about their child’s allergy in writing, by filling out our initial risk assessment form for Food Allergies. The form includes:**

* The allergen (the substance the child is allergic to)
* The nature of the allergic reaction (from rash, breathing problems to anaphylacticshock)
* What to do in case of allergic reaction, including any medication to be used and how it is to be used.
* Control measures – such as how the child can be prevented from getting into contactwith the allergen.
* If a child has an allergy requiring an EpiPen, or the risk assessment deems it necessary, a “healthcare plan” must be completed and signed by the parents.
* It is the responsibility of the Parent to provide the nursery with up to date medication/equipment clearly labelled in a suitable container.
* In the case of life saving medication like EpiPens the child will not be allowed to attend without it.
* Parents are also required to provide up to date emergency contact information.
* Snacks and lunches brought into nursery are provided by each child‘s Parent.
* It is their responsibility to ensure that the contents are safe for the child to consume.
* Parents should liaise with Staff about appropriateness of snacks and any food-related activities (e.g. cooking)

**Staff's role**

**Staff are responsible for familiarising themselves with the policy and to adhere to Health & Safety regulations regarding food and drink.**

* If a child’s Application form states that they have an allergy then the parents must fill out the risk assessment form before the child starts attending sessions. Any actions identified to be put in place. If a child has an allergy requiring an EpiPen, or the risk assessment deems it necessary, a “healthcare plan” must be completed and signed by staff and parents.
* Upon determining that a child attending nursery has a severe allergy, a team meeting will be set up as soon as possible where all Staff concerned attend to update knowledge and awareness of child’s needs.
* All Staff who come into contact with the child will be made aware of what treatment/medication is required by the nursery manager and where any medication is stored.
* All staff are to promote hand washing before and after eating.
* Snack time snacks are monitored by Staff and are peanut, nut free and other allergens depending on the children attending. All staff should know the procedures at snack and lunch time to ensure the safety of children with allergies.
* However Staff cannot guarantee that foods will not contain traces of nuts.
* All tables are cleaned with an approved solution.
* Children are not permitted to share food.
* As part of the Staff first aid course, EpiPen use and storage has been discussed.
* We may ask the Parent for a list of food products and food derivatives the child must not come into contact with.
* Emergency medication should be easily accessible, especially at times of high risk.
* Staff should liaise with Parents about snacks and any food-related activities.

**Signs of Allergic reaction:** What we would class as mild or severe reactions are:

**Mild to moderate allergic reaction**

• Skin redness, hives or welts  
• Swelling of the face, lips and eyes  
• Tingling mouth, abdominal pain, vomiting.

**Severe allergic reaction/Anaphylaxis**

• Difficult/noisy breathing  
• Swelling of the tongue  
• Swelling or tightness of the throat  
• Difficulty talking and/or hoarse voice  
• Wheeze or persistent cough  
• Loss of consciousness and/or collapse  
• Children can quickly become pale and floppy.

If we suspect a child has had a reaction **parents will be contacted immediately** regardless of a mild or severe reaction.

**In the event of a child suffering an allergic reaction:**

* We will delegate someone to contact the child’s Parents.
* If a child becomes distressed or symptoms become more serious telephone 999
* Keep calm, make the child feel comfortable and give the child space.
* If medication is available it will be administered as per training and in conjunction with the “Medicine Policy”.
* If Parents have not arrived by the time ambulance arrives, a member of Staff will accompany the child to hospital.

Guidance;

Statutory framework for the early years’ foundation stage. (September 2021)

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| This policy was reviewed and amended August 2021 |  |  |
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(Policies dated and signed by Manager – May be viewed in nursery ‘Policy and Procedure File’)

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| Annex A To Health & Safety Policy **Procedures for Children with Allergies** Risk assessment – Admission of child with specific food allergy **Initial parental consultation** | |
| **Name of Child:** | **Child’s Date of Birth:** |
| **Name(s) of Parent(s):**  **1.**  **2.** | |
| **Emergency Contact Details:** Name & Telephone No. of Doctor:  Surgery:  Contact Tel. No. for Parent:  1.  2.  Emergency Contact Nos. if parent unavailable:  1. Name: Telephone No:  Relationship to child/family:  2. Name: Telephone No:  Relationship to child/family | |
| **Nature of Allergy:** | |
| **Severity of Allergy:** | |
| **Symptoms of Adverse Reaction** | |
| **Details of Any Medication provided in the event of an allergic reaction/anaphylactic shock. (to include dosage, when + how medication is to be administered)** | |
| **Precautions to be taken to avoid allergic reaction** | |
| **Signatures:** Staff Signature The above details have been provided by ………………………………………………  Parent of …………………………………………………………..  Signed: ………………………………………………………………  (member of staff)  Date: Parent’s Signature The above details provided by myself in respect of my child ………………………………………………  …………………………….. are a correct and true record of the allergy, its symptoms, treatment and prevention suffered by child. I give permission for a risk assessment to be carried out by the above-named member of staff and the nursery Manager before admitting my child to the nursery.  Signed:…………………………………………………… Date: …………………………………….  Name in block capitals; …………………………………………………………….  Relationship to child ……………………………………………………………….. | |